LINCOLN VILLAGE CONVALESCENT CENTER

1700 C A BECKER DRIVE

RACINE 53406 Phone: (262) 637-9751 Ownership: Nonprofit Church/Corporation Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No No Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/02): 122 Total Licensed Bed Capacity (12/31/02): Title 19 (Medicaid) Certified? 122 Yes Number of Residents on 12/31/02: 106 Average Daily Census: 112

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/02) %						
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	% Age Groups			Less Than 1 Year 1 - 4 Years	36.8 39.6	
Supp. Home Care-Household Services	No	'		Under 65	4.7	•	23.6	
Day Services	No	· .	15.1		5.7	•		
Respite Care	No		2.8	75 - 84	27.4		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	49.1	*********	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.9	95 & Over	13.2	Full-Time Equivaler	nt	
Congregate Meals No		Cancer	3.8			Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	15.1	65 & Over	95.3			
Transportation	No	Cerebrovascular	10.4			RNs	11.4	
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	7.7	
Other Services	No	Respiratory	2.8			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	49.1	Male	25.5	Aides, & Orderlies	41.0	
Mentally Ill	No	1		Female	74.5			
Provide Day Programming for		1	100.0					
Developmentally Disabled	No	1			100.0			

Method of Reimbursement

		edicare			edicaid			Other			Private Pay	:		amily Care			anaged Care			
Level of Care	No.	olo	Per Diem (\$)	No.	o _o	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	0/0	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	3	4.8	127	0	0.0	0	1	5.3	208	0	0.0	0	0	0.0	0	4	3.8
Skilled Care	24	100.0	234	55	87.3	108	0	0.0	0	18	94.7	180	0	0.0	0	0	0.0	0	97	91.5
Intermediate				5	7.9	89	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	4.7
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	24	100.0		63	100.0		0	0.0		19	100.0		0	0.0		0	0.0		106	100.0

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*******	*****	******	*****	*****	*****	*****	******
Admissions, Discharges, and	I	Percent Distribution	of Residents'	Condit	ions, Services	, and Activities as of 12/	31/02
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	용	As	sistance of	% Totally	Number of
Private Home/No Home Health	1.4	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	2.8		72.6	24.5	106
Other Nursing Homes			2.8		75.5	21.7	106
Acute Care Hospitals	95.8	Transferring	3.8		70.8	25.5	106
Psych. HospMR/DD Facilities	0.0	Toilet Use	4.7		67.0	28.3	106
Rehabilitation Hospitals	0.0	Eating	55.7		28.3	16.0	106
Other Locations	0.5	*****	*****	*****	*****	* * * * * * * * * * * * * * * * * * * *	*****
Total Number of Admissions	214	Continence		용	Special Trea	tments	%
Percent Discharges To:		Indwelling Or Externa	al Catheter	3.8	Receiving :	Respiratory Care	11.3
Private Home/No Home Health	44.5	· •		47.2	Receiving '	Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent	t of Bowel	22.6	Receiving	Suctioning	0.0
Other Nursing Homes	6.2				Receiving	Ostomy Care	5.7
Acute Care Hospitals	10.6	Mobility			Receiving '	Tube Feeding	3.8
Psych. HospMR/DD Facilities	0.0	Physically Restrained	d	0.9	Receiving 1	Mechanically Altered Diets	11.3
Rehabilitation Hospitals	0.0						
Other Locations	12.8	Skin Care			Other Reside:	nt Characteristics	
Deaths	26.0	With Pressure Sores		11.3	Have Advan	ce Directives	43.4
Total Number of Discharges	I	With Rashes		0.9	Medications		
(Including Deaths)	227				Receiving	Psychoactive Drugs	65.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Owne	ership:	Bed	Size:	Lic	ensure:				
	This	This Nonprofit Facility Peer Group		100	-199	Ski	lled	Al	1		
	Facility			Peer	Group	Peer Group		Faci	lities		
	ଚ	%	Ratio	୧	Ratio	%	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	91.8	87.5	1.05	85.7	1.07	85.3	1.08	85.1	1.08		
Current Residents from In-County	98.1	79.3	1.24	81.9	1.20	81.5	1.20	76.6	1.28		
Admissions from In-County, Still Residing	18.2	21.8	0.84	20.1	0.91	20.4	0.89	20.3	0.90		
Admissions/Average Daily Census	191.1	124.6	1.53	162.5	1.18	146.1	1.31	133.4	1.43		
Discharges/Average Daily Census	202.7	129.0	1.57	161.6	1.25	147.5	1.37	135.3	1.50		
Discharges To Private Residence/Average Daily Census	90.2	50.5	1.79	70.3	1.28	63.3	1.43	56.6	1.59		
Residents Receiving Skilled Care	95.3	94.7	1.01	93.4	1.02	92.4	1.03	86.3	1.10		
Residents Aged 65 and Older	95.3	96.2	0.99	91.9	1.04	92.0	1.04	87.7	1.09		
Title 19 (Medicaid) Funded Residents	59.4	56.7	1.05	63.8	0.93	63.6	0.93	67.5	0.88		
Private Pay Funded Residents	17.9	32.8	0.55	22.1	0.81	24.0	0.75	21.0	0.85		
Developmentally Disabled Residents	0.0	0.5	0.00	0.9	0.00	1.2	0.00	7.1	0.00		
Mentally Ill Residents	17.9	35.5	0.50	37.0	0.48	36.2	0.50	33.3	0.54		
General Medical Service Residents	49.1	23.8	2.07	21.0	2.33	22.5	2.18	20.5	2.39		
Impaired ADL (Mean)	54.9	50.4	1.09	49.2	1.12	49.3	1.11	49.3	1.11		
Psychological Problems	65.1	54.7	1.19	53.2	1.22	54.7	1.19	54.0	1.21		
Nursing Care Required (Mean)	5.5	6.9	0.80	6.9	0.80	6.7	0.82	7.2	0.77		